

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

03/03/92

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD048806616

FACILITY NAME -> L P THEBAULT CO

MAILING ADDRESS -> 345 WALSH DR

PARSIPPANY, NJ 07054-3751

INSTALLATION ADDRESS -> 345 WALSH DR PARSIPPANY, NJ 07054-3751

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: SCHUBERTH, MIKE COMPLIANCE MGR L P THEBAULT CO 249 POMEROY RD

PARSIPPANY, NJ 07054-3751 Form DWM-029

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION DIVISION OF WASTE MANAGEMENT

INSPECTION REPORT

REPORT PREPARED FOR:		The state of
☑ Generator		
☐ Transporter		
M HWM (TSD) Facility		
		EAGUITY INCOMA TION
	Name	Calvin Klein Cosmetics Corp.
	Address:	345 Walsh Dr.
	7,001033.	Parsippany NT 07054
	Lot	Block:
	County:	·
	Phone:	(201) 263-1655
	EPA ID#:	NT D048806616
Date	of Inspection:	9-3-87
		PARTICIPATING PERSONNEL
State or	EPA Personnel:	Pattricia Watterson (Versar)
		Donald Fulton (Versar)
Fac	ility Personnel:	Keith Demsey-Production Manage
Report Pres	ared by Name:	Patricia Watterson (Versor)
. Inspect of the	for Region:	
		(703) 750-3000
	Reviewed by:	
	Reviewed by:	

Date of Review:

	FACILI	TY NAME: .	Calvin Klein Cosmetics Corp.
		ADDRESS: .	345 Walsh Dr
	•		Parsippany NT 07054
TIME IN: 0900		COUNTY:	
TIME OUT: 1215		EPA ID : .	NT D0488066163
	DATE OF IN	SPECTION: .	9-3-87
PHOTOS TAKEN	☐ YES	⊠ NO	
If yes, how many?			
SAMPLE TAKEN	☐ YES	⊠ NO	NO. OF SAMPLES NA
NJDEP ID#		_ `	
MANIFESTS REVIEWED	☑ YES	□ NO	Only two manifests was available at the time of the inspection. Additional manifests were requested but, not
Number of manifest	ts in compliance	<u> </u>	manifests were requested but, not
Number of manifest	ts not in complia	nce O	received.
List manifest o	document numbe	ers of those m	anifests not in compliance.
	N/A		

TABLE OF CONTENTS

	Page
SUMMARY OF FINDINGS	1
Facility Description and Operations	1
Hazardous Waste Generation Activities	2
Identification of Hazardous Wastes Located Onsite	2
CONCLUSIONS	3
ATTACHMENT 1 - Pertinent Documentation	
Exhibit 1 - Letter documenting approval of closure plan Exhibit 2 - Hazardous Waste Manifests (6/29/87, 6/30/87)	

SUMMARY OF FINDINGS

Facility Description and Operations

Calvin Klein Cosmetic Corporation was not in full operation during the site inspection on September 3, 1987. The facility was in the process of moving to a new location and the facility contained only perfume and other cosmetic products which were packaged and ready for shipment. The waste storage area located within the warehouse was absent of waste. The only product that remained was perfume which was drummed and waiting to be bottled. The underground storage tank for the waste had already been removed (July 1987) after approval of the closure plan (see Attachment 1, Exhibit 1). Soil samples around the tank have been collected and the final NJDEP approved closure of the facility is pending on these sample results.

The Calvin Klein facility in Parsippany, New Jersey was a generator of D001 waste, and a TSD facility because they stored this waste longer than 90 days. D001 waste was containerized in two regulated units; a drum storage area, and an underground storage tank. The drum storage area is located within the manufacturing building and consists of a designated portion of a large storage room, which is equipped with floor drains. Calvin Klein containerized waste perfume and bottles in 30-gallon drums in this storage area. The underground storage tank was constructed of steel, and had a 12,000-gallon capacity. Waste perfume, in addition to water and cleaning liquids used to clean the floor, were stored in the underground storage tank.

The site inspection involved a visual inspection of regulated units at the facility in addition to a review of the facility's records. The storage tank previously located in the tank storage area was no longer onsite. After the tank was removed from the ground, the area was filled in with soil, and asphalt was placed on top. The drum storage area did not contain any waste at the time of the inspection.

Hazardous Waste Generation Activities

Calvin Klein Cosmetics Corporation in Parsippany, New Jersey receives perfume at the plant in 55-gallon containers. The perfume is bottled at the plant and sent to distributors. Distributors often send unused portions of perfume back to Calvin Klein in bottles. Hazardous waste (D001) is generated from the disposal of the unused portions of perfume. The unused perfume and bottles are stored in 30-gallon drums. The perfume is then emptied out of the bottles and sent through a drain system installed in the floor of the drum storage area to the underground storage tank.

After approval of their closure plan for the underground storage tank and storage container area on May 19, 1987, Calvin Klein commenced with the closure of both of these units (see Attachment, Exhibit 1). However, closure of Calvin Klein's tank storage area is pending on the results of soil sampling around the underground tank. Calvin Klein is vacating the building and moving their operations to Wayne, New Jersey. The facility was inspected as a TSDF because the facility's closure plan has not been officially approved by NJDEP.

Cossec

Identification of Hazardous Wastes Located Onsite

At the time of the inspection, there was no hazardous waste at the facility. The underground storage tank which had contained D001 waste had recently been emptied (July 1987) and removed from the site by Advanced Engineering Technology Corporation (AETC). The waste from the emptied tank was sent offsite on June 29 and 30, 1987 (see Attachment 1, Exhibit 2). There was no hazardous waste in the drum storage area during the time of the inspection.

cast wi

Calvin Klein	<u>/</u>	
Request ed	further document Received,	, were they
	MINOR COMMENTS	

Inspector: TONES 1259 127 46 PARSIPPANY NT
Telephone No: 201-299-7570

RCRA LAND DISPOSAL RESTRICTION

GENERATOR CHECKLIST	DN .
I. HANDLER IDENTIFICATION	
CALVIN KLEIN ALIESSOPIES	
	WAISH DR
THE STIPMOV	Street (Or Other II)
D. State E. Zip	Code F. County Name
G. Nature of Business; Identification of Co.	P. County Name
G. Nature of Business; Identification of Operations: SIC Co	de(s)
I. Handler Contact (Name and Phone Number)	5
II. GENERATOR COMP	
COMPLIANCE	
A. Vaste Identification 1. F-Solvents	Comments
1. F-Solvents	
a. Does the handler generate the following wastes?	NO WASTES ARK
(i) FOO1: FOO2 FOO2	, , , , , , , , , , , , , , , , , , , ,
(1) - F001, F002, F004, or F005YesNo	GENERATED. THEY
If an FOO3 No	PErformés closurie
If an F003 wastestream (listed solely for ignitability) has been mixed with a non-restricted mixture exhibits at the resultant	IN 1988 SHILETSFILLY
solid or hazardous waste, does the resultant mixture exhibit the ignitability characteristic?	But weglected
characteristic?	TO DELIST THEIR
b. Source of the above: Form 8700-12; Part A other (specify) Appendix A is inserted.	1D #
other (specify) Blennial/Annual Reports	
ment official intended to assist the income	HAS BEGUN
by the facilities wastes, if such wastes were	Process for TOTAL DELISTING
F-solvent waster previously. If you are consent identified	Total Delistria
Appendix A-1. To assist in identifying potentially	10 PR PRIISING

		Handler Name: ID Number: Inspector: Date:
misclassifi correspondi	led F-solvents, Appendix A-2 presents a listing P and W wastes. Note concerns below:	of
2. Di	oxin vastes	
4.	Does the handler report the generation of following wastes? (The following industrimay generate listed dioxin wastes: organichemicals, pesticide or formulator.)	the es c
[F-solvent B	(i) F020 - F023, F026 - F027 Yes	_No
3. Cal	ifornia Waste Identification	
a.	Does the facility handle any of the following wastes?	ng
	(i) D002 (ii) D004 - D011Yes	_No _No
b.	characterized by high concentrations of hal genated organic constituents (HOCs), metals	0- . Or
[California w	Yes reste standards are presented as Appendix C	No
c.	Is the generator handling any of the F, K, I or U wastes subject to the "soft hammer" the may qualify as California wastes due to HOC, metals, or cyanide content? See Appendix D a listing of California constituents likely be found by waste code.	P,
d.	Has the generator conducted the paint filter test (Hethod 9095) [\$268.32(i)]?	
		No*
	Has the generator conducted any testing of these hazardous wastes to determine whether	the
	California vastes?	es No
	If no, has the generator retained records do menting his "applied knowledge" that the mazardous waste is not a California waste?	

MA

Comments

		Handler Name: ID Number: Inspector: Date:
	If "no" is answered to both parts of this question, a violation is indicated. [§268.7	(a)]
	Describe the nature of the records:	
f.	Source of the above: Form 8700-12; Part B; Biennial/Annual Report other (specify)	rt A
. Fir	st Third Waste Identification	
a.	Does the generator handle any of the wastes listed as First Third Wastes in §268.10? Se Appendix E for listing. List First Third Wastes handled by the generator here:	·• //
		= //
b.	Does the generator handle any soft-hammer wastes (Appendices D-1, D-2, and F)? If so, list those wastes:	
c.	Are any of the soft-hammered wastes Californ wastes (see Appendix G)? Yes	
	If yes, the wastes must meet BDAT standards prior to disposal.	
d.	Has the Regional Administrator received demonstrations/certifications for all soft hammered wastes to be land disposed [\$268.8(a)(2)]?YesP	io*
	Source of the above: Form 8700-12 ; Part ; Part B ; Biennial/Annual Report other (specify)	: A _;
AT Tre	atability Group - Treatment Standards	
	Cacton	
Does diff conc	the generator mix restricted wastes with erent treatment standards for constituents of ern? Yes	No
	es, did the generator select the most stringe tment standard for the constituent of concernYesNo.	nt o*

Comments

В.

1.

2.

			Handler Name: ID Number: Inspector: Date:
3.	P	Solvents	
	2	Did the generator correctly determine the appropriate treatability group [\$268.41] of vaste (e.g., vastewaters containing solven nonvastewater (i.e., < 1% TOC), pharmaceut vastewaters containing spent methylene chloride, all other spent solvent wastes)? Yes	its,
4.	Ca	lifornia Wastes	
	a.	Did the generator correctly determine the distinction between liquid hazardous waste non-liquid hazardous wastes that contain H in concentrations greater than 1,000 mg/kg [\$268.32(h)]?	
		Yes	_No*
5.	Fin	rst Third Wastes	
	a.	Did the generator ascertain whether restrict wastes were appropriately assigned wasteward or nonvestewater designations (nonvastewater are > 1% TOC and > 1% suspended solids) [§268.7(a)]?	
	b.	Does the facility handle K061 wastes?Yes	_No
		If yes, were nonwastewaters appropriately classified in either the high or low zinc subcategories (≥15% Zn) [\$268.7(a)] [\$268.41(a)]?Yes	_No*
	c.	Does the facility handle K101 or K102 wasteYes	s? _No
		If yes, were nonwastewaters appropriately classified in either the high or low arseni subcategories [\$268.7(a)] [\$268.41(a)]? Yes	c _No*
	d.	Is there any reason to believe that the generator may have diluted the waste to change applicable treatment standard (based on revior process operation, pipe routing, point of sampling)?	the
		• • • •	.,,

Comments

MA

			ID Number: Inspector:
Vaste	Araly		Come
1. D:	id the	generator determine whether the waste treatment standards based on §268.7(a):	
a.		vledge of wastesYes	
	(i)		_No dge"
b.		Yes	No /
	(i)	List wastes for which "TCLP" was used:	_ ///
	(11)	ment standards are expressed as concentrations in waste extract. Were any wastes handled by the generator subjecto waste extract standards not tested using the TCLP?	ı - // /
_		If yes, list:	
c.	Total	waste analysis Yes	No
d.	If fill basis	les were retained, describe content and of applied knowledge determination:	
	of tes	termined by TCLP or total constituent is, provide date of last test, frequency ting, and attach test results.	y
-1		hich vastes were subjected to which	
-		ny problems (e.g., inadequate analysis, ion of waste composition/generation for knowledge)	

	Handler Na ID Number: Inspector: Date:	the second second
	e. Were vagtes tested using TCLP or total constituent analysis when a process or wastestream changed [\$264.13(a)(3)(i) or \$265.13(a)(3)(i)]? YesNo*	Comments
2.	ability group treatment standards upon generation [§268.7(a)(1)]?	
	List those that exceeded standards: List those that did not exceed standards:	
3.	Did the generator dilute the waste or the treatment residual so as to substitute for adequate treatment [\$268.3]Yes*No	, , ,
Mai	nagement (TREAT TO ENCEED TREATMENT STANDARDS)	1//
1.	Onsite management	///////////////////////////////////////
	a. Were restricted wastes managed onsite?YesNo	
	If no, go to "2".	1
	b. For wastes that exceed treatment standards, was treatment in regulated units, storage for greater than 90 days, and/or disposal conducted? YesNo	
	If yes, TSDF checklist must be completed.	,
2.	Offsite Management	
	a. If restricted vastes exceed treatment stand- ards, did generator provide treatment facility notification with each shipment? [268.7(a)(1)]:	
	(i) EPA Hazardous Waste Number?YesNo*	
	(ii) Corresponding treatment standard?YesNo*	
	(iii) Manifest number?YesNo*	
	(iv) Waste analysis, if available?YesNo	

D.

^{*/} A potential violation is indicated

		ID Number:
	k.	Inspector:
Ident	ify offsite treatment facilities	Comments
Ia	f restricted wastes do not exceed treatme tandards, did generator provide the dispo acility with a notice and certification acluding:	ent osal
(i	mazardons waste I.D. number?	
(i	i) Corresponding treatment standard? Yes Yes	_No*
	(i) Manifest number Yes	_No*
	i) Certification regarding waste and that meets treatment standards?Yes	Not
Identif BDAT ce	y land disposal facilities receiving the rtified wastes	
- Appo nati	the generator's waste is subject to a \$26 by case exemption, a \$268.6 monomigration, or a nationwide variance (see endix E for restricted wastes subject to ionwide variances), does the generator's ords indicate that he or she submits with waste shipment [\$268.7(a)(3)]:	lon"
(i)	EPA Hazardous Waste Number?	
	Corresponding Treatment Standards? Yes	No*
(iii) All applicable prohibitions?	io*
(iv)	The manifest number? Yes N	io*
(v)	The date the wastes are subject to prohibitions? Yes	o*
(vi)	Does generator keep records of all notifications/certifications send to offsite facilities? Yes No	

		Handler Namer: ID Number: Inspector: Date:	ne:
l a	ist all prohibited wastes for which recorder not provided per above [\$268.7(a)(b):	ds	
I o	dentify TSDFs receiving any prohibited was ubject to any exemptions and variances:	ites	
a i	handler generates a "soft hammer" waste, es the generator send with each "soft hammer ste shipment to a TSDF and retain copies on the copies of the copies o	mer"	
The	EPA Hazardous Waste Number?Yes Plicable prohibitions?	No*	
The	manifest number?	No* No*	
	te analysis data, where available? Yes	No.	
(i)	Do the generator's records indicate that any soft-hammer wastes are destined for disposed in a landfill or surface impoundment [\$268.33(f)]? Yes No If yes, list facility of destination and waste of concern [\$268.8(a)(2)]	it	(
(ii)	Has the generator submitted demonstrations and certifications for each "soft-hammered" waste destined to be disposed in landfill or surface impoundment to the Regional Administrator prior to the shipment of waste to the TSDF [\$268.7(a)(2)]?		
(iii)	Has the generator retained a copy of the demonstration on site [\$268.8(a)(3)-(a)(4)]?		
(iv)	Has the generator retained copies of all [\$268.8 certifications sent to the TSDF Yes Not		

1//

Comments

*	Handler Name: ID Number: Inspector: Date:
	(v) Did-the generator submit the demonstration to the receiving facility upon the intial shipment of the waste [§268.8(a)(3)-(a)(4)]?Yes No*
	(vi) If the Region: Administrator has invalidated the certification, has the generator ceased shipment of the vaste and do records indicate that the generator has informed all receiving facilities of the invalidation [§268.8(b)(3)]?
E.	Yes Not
	Storage of Prohibited Waste
	 Were prohibited wastes stored for greater than 90 — Yes No
	If yes, was facility operating as a TSD under interim status or final permit [\$262.34(b)]? Yes No*
	If yes, TSDF Checklist must be completed.
F.	Treatment Using RCRA 264/265 Exempt Units or Processes (i.e., boilers, furnaces, distillation units, waste- water treatment tanks, etc.)
•	 Were treatment residuals generated from RCRA 264/265 exempt units or processes? Yes No
	If yes, list type of treatment unit and processes
	If yes, TSDF checklist must be completed.

Comments

1///-